

Basic Medication Awareness & Infection Control - CFH

2018 Curriculum



Assisting with Medication May Include:

- Breaking or crushing a scored tablet
- Instilling eye, ear or nose drops
- Giving medication through pre-mixed nebulizer inhaler or gastric tube
- Assisting with oral or topical medications
- Insertion of suppositories



REQUIREMENTS FOR A PROVIDER:

- Report to the appropriate health care professional when a medication was not taken.
- Understand the proper use and side effects of prescribed and over-the-counter medications.
- Know which medication containers are correct.
- Use proper measuring devices.
- Keep accurate records regarding medications. Examples are:
 - Inventory of narcotics.
 - Record of medications taken including date, time and dosage.
 - Know what to report and document. Examples are:
 - Any medication dosages not taken.
 - Adverse side effects.
 - A decrease in the client's ability to self-administer medications.

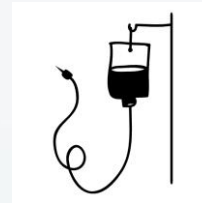
LIMITATIONS FOR A CFH PROVIDER

- Prepare or give injections



- Adjust or stop medication dosage without written directions to do so by the resident's health care professional.

- Start, stop or adjust any IV therapy.



- Transfer resident's medications to a Mediset



STORING/CARING FOR MEDICATIONS

All medications MUST* be kept in the **original** packaging, UNLESS a pharmacist or licensed nurse fills and labels a Mediset (a daily plastic dispenser, also known as a pill box) OR a blister pack (pills individually packaged on a sealed card).

All medications must be stored separately for each individual in the home.

All medications must be stored in a safe place away from children, teens and visitors.

If the medication is a controlled substance and/or a member of the household has drug-seeking behavior, medications must be locked in a container or cabinet. If the client self-administers meds, CFH is to provide the client their own lock box and key for storage of the controlled substance.

ALWAYS read the “storage directions” on each medication for specific storage instructions.

CHEMICAL COMPOUNDS

Medications are chemical compounds; their composition and strength can be affected by the way they are stored.

- ❖ Store medications in a cool, dry place. Avoid too much light.
- ❖ Avoid storing medications in bathrooms because of the steam created in the bathroom.
- ❖ Avoid medication exposure to extreme cold or hot temperatures unless medication is required to be refrigerated. Designate a specific area in the refrigerator as a medication area.

Certified Family Home providers/substitute caregivers should **NEVER** do the following:

- Combine different medications into one bottle.
- Store or combine loose medications in a plastic bag.
- Put an unidentified pill back into a bottle. Any pill or capsule that is not recognizable can be taken into the pharmacy for identification.

Inventories:

If the CFH provider is assisting with opioid pain relievers (e.g., Oxycodone, Hydrocodone, Morphine, Fentanyl, etc.), the meds must be inventoried at least every thirty (30) days. A record of the inventory should be kept with the client's medication records.

PRESCRIPTIONS & PHARMACY

A Prescription Medication is ordered by a health care professional.

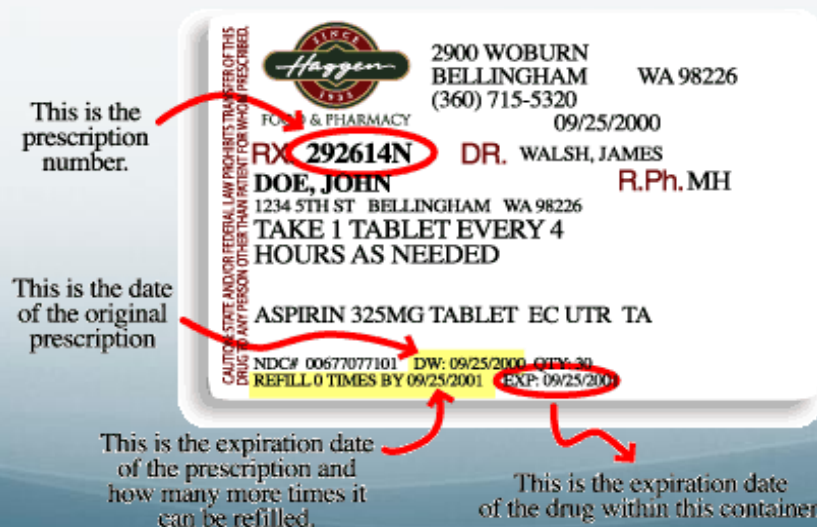
- ❖ Once a medication is prescribed, it is the CFH provider's responsibility to make sure the medication is obtained from the pharmacy.
- ❖ A prescription medication is ordered by the health care professional to treat symptoms, diseases, or medical conditions.
- ❖ The prescription medication is to be taken **ONLY** by the person for whom it was prescribed.

Utilizing a prescription medication for anyone other than for whom it was prescribed is at best negligence, *and in some cases, could be criminal depending upon the medication involved.*

BE ALERT to medication names that are similar. Make certain the right medication is being taken. (Flonase (allergies) vs Flovent (asthma))

PRESCRIPTION LABEL INFORMATION

1. Patient's name
2. Health care professional's name.
3. Date filled.
4. Expiration date.
5. Number of refills.
6. Names of the medication – Most have two: the name brand and the generic
7. Dose of medication
8. Directions for use and how often to take the medication
9. Any precautions
10. Storage information
11. Pharmacy contact information



MEDICATION INFORMATION SHEETS

All medications come with information sheets. ALWAYS keep these sheets in your resident records. The following important information is found within the medication information sheet:

- ☐ Purpose of the medication
- ☐ Expected effect of medication
- ☐ Possible side effects
- ☐ Adverse reactions
- ☐ What to do if a dose is missed
- ☐ What to do in case of an emergency

New medications:

- ❖ When a new medication is prescribed, it is extremely important that the medication is filled immediately or as soon as reasonably possible.
- ❖ Written prescriptions must be kept in a safe place until given to your pharmacist.
- ❖ It is best to use the SAME PHARMACY for filling all prescriptions for a resident. The resident must be allowed to choose the pharmacy.
- ❖ The pharmacist has an individual medication profile to review for drug interactions.

10 KEY QUESTIONS

1. Prescription medications have two (2) commonly used names; what are the brand and generic names for the medication?
2. What is the medication being used for?
3. How much is taken and how often?
4. What do I do if a dose is missed?
5. How long will the medication need to be taken?
6. What side effects could occur?
7. What do I do if side effects happen?

8. Does this medication interfere with other medications? Can certain foods interfere with this medication?
9. Does this medication replace any other medication currently being taken?
10. Where and how should the medication be stored?

Refilling Existing Medication Orders

Allow time to contact the resident's health care professional, pharmacy and/or authorization agencies.

When there are seven (7) days of medication remaining, contact the health care professional or pharmacy for a refill of the prescription medication.

Over-the-Counter Medications:

A non-prescription medication is medication purchased “over-the-counter” (OTC) or off the shelf. Non-prescription medications DO NOT require a special written prescription by the health care professional. However, they do require a prescriber's order.

What to know about non-prescription medications:

- * Utilizing non-prescription or “OTC” (over-the-counter) medications may make other conditions worse or create unwanted side effects.

- * When using non-prescription/over-the-counter medications, residents and/or providers overseeing resident’s medication needs should CHECK with the health care professional or local pharmacist for possible drug interaction.

- Read Instructions on NON-Prescription or OTC Medications.

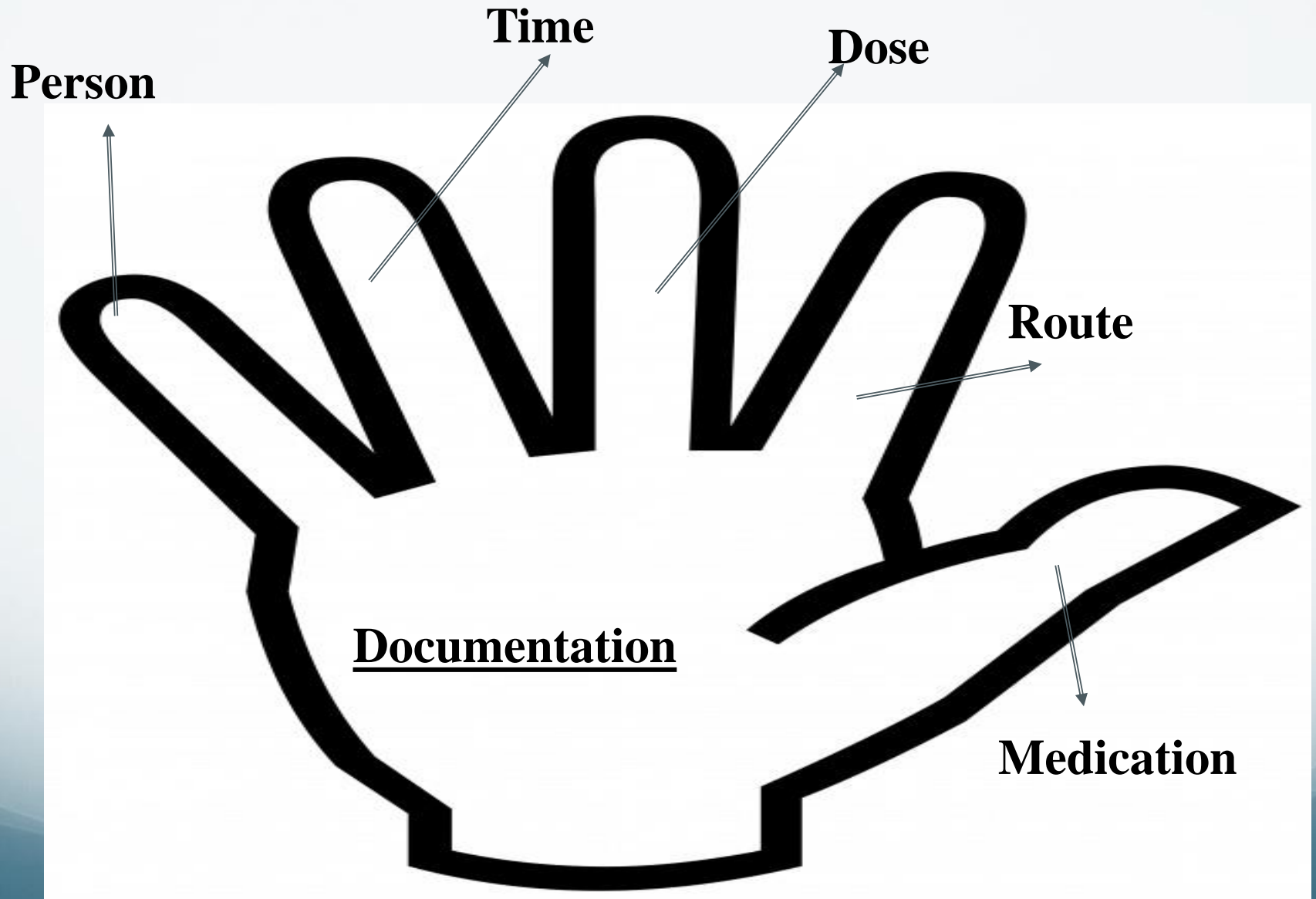
- Pay special attention to the warnings associated with these types of medications.

- You must dispose of all expired medication (including OTC medication) within 30 days.

- When assisting with OTC medications, it is REQUIRED that you record these medications on your medication log sheets, including a notation for the reason the medication was given if it is PRN.

- The supervising health care professional needs to be aware of all medications taken by your resident.

6 Rights of Medication Oversight



Newly Admitted Residents

- Do not allow any expired medications into your home.
- Do not allow any medications not currently prescribed into your home.

Measuring

- ✓ Never guess when measuring medication dose. Use an accurate measuring device.
- ✓ Purchase a special oral syringe or measuring spoon for accurate measuring of liquids.

Good Responses

- When a resident starts a new medication, it is the provider's responsibility to watch the resident for the intended response.
- To recognize the desired response, the provider must understand the purpose of the prescription.

Bad Responses

- ❑ When a new medication is started, watch the resident for adverse (negative) responses.

Allergic Reactions

❖ When do Allergic Reactions/Side Effects appear?

- Allergic reactions may have many symptoms that may appear immediately or not until several days/weeks or even months/years have passed.

❖ REMEMBER:

- Any medication can have an adverse or unexpected effect **anytime**.
- Any known allergies to medications should be WRITTEN on the resident's medication record keeping sheets and always reported to the doctor and pharmacist.

➤ **Anaphylaxis** (Anaphylactic Shock) is the most dangerous type of allergic reaction.

➤ **Anaphylaxis is a life-threatening situation**

✓ Call 9-1-1 if you suspect an anaphylactic reaction!

✓ *Provide CPR as needed until the emergency medical personnel arrive.*

✓ *Have the name of the medications and the dose taken ready for the emergency medical personnel.*



Alcohol & Illicit Drug Use

There are MAJOR dangers associated with drinking alcoholic beverages or taking illicit drugs while using prescribed and over-the-counter medications.

REPORT to the medical professional and DOCUMENT any illicit drug and/or alcohol use by the resident.

Vitamin, Herbs & Home Remedies

- Vitamins, herbs, and home remedies may increase or decrease medication effects.
- The health care professional must be advised of vitamins, herbs, and home remedy use.
- Vitamins, herbs and home remedies must be written and documented on the medication log sheets and have a form signed by the resident's health care professional that their use is authorized.

Contacting the Health Care Professional

- * Refusal to take medications.
- * Missed medications.
- * Resident vomits medication within 20 minutes of taking.
- * Resident is nauseated, vomiting, or having diarrhea.
- * Resident has pills or coated tablets in stool/feces/bowel movements.
- * Resident shows changes in mental status—confusion or stupor.
- * Any other concerns/problems noticed.

Disposal of Medications

The disposal of medications needs to be documented and witnessed by a credible witness (not a resident).

Do not throw any medications in the trash. Residents, children or animals could gain access to it, even after the garbage has been hauled away.

Do not flush any medication down the toilet. Many chemicals are not filtered out of our drinking water.

Controlled Substances:

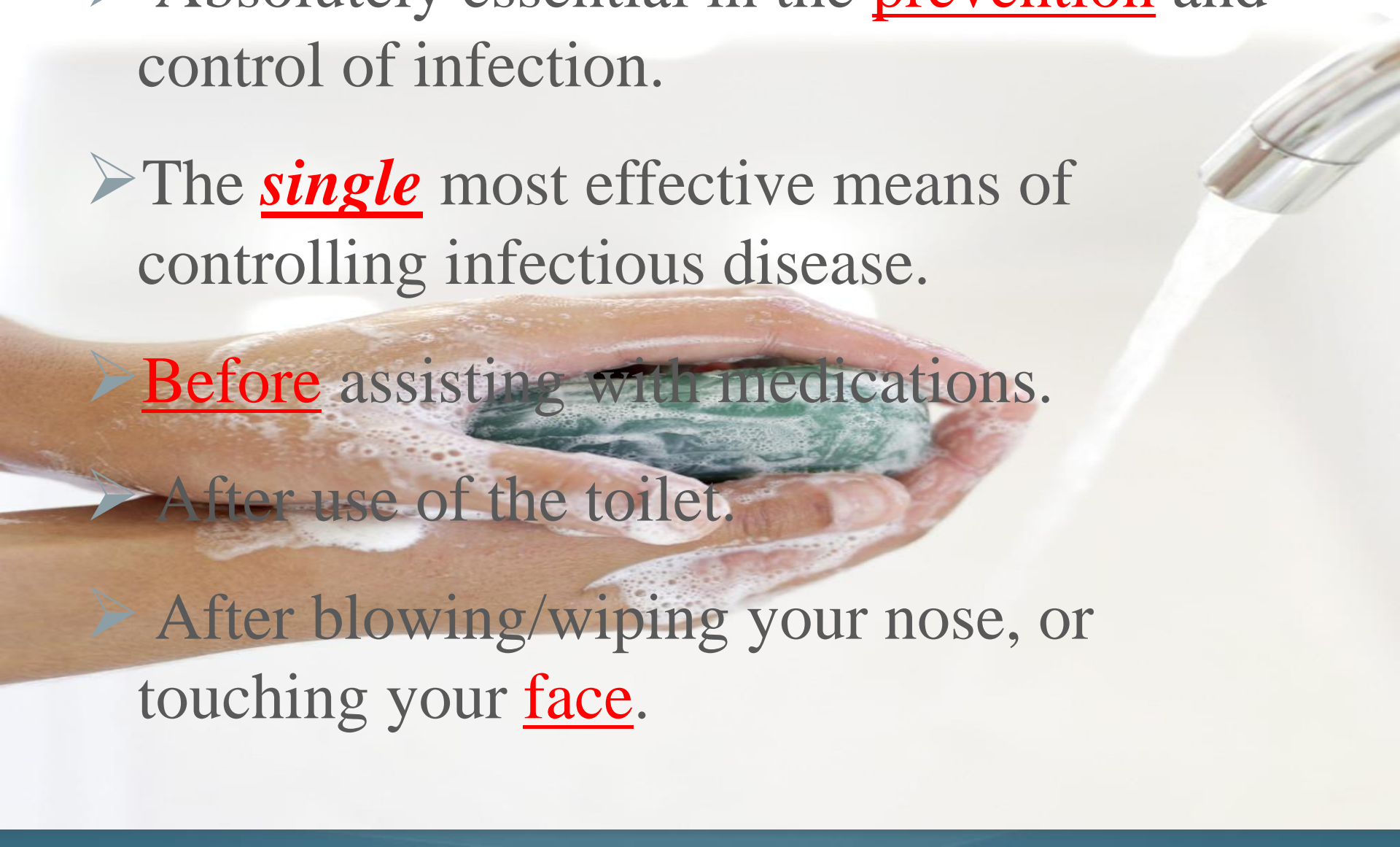
- * Observe that these medications are being taken correctly.
- * Visitors and/or family members should not be able to access these types of medications.
- * These types of medication should be kept under lock and key.

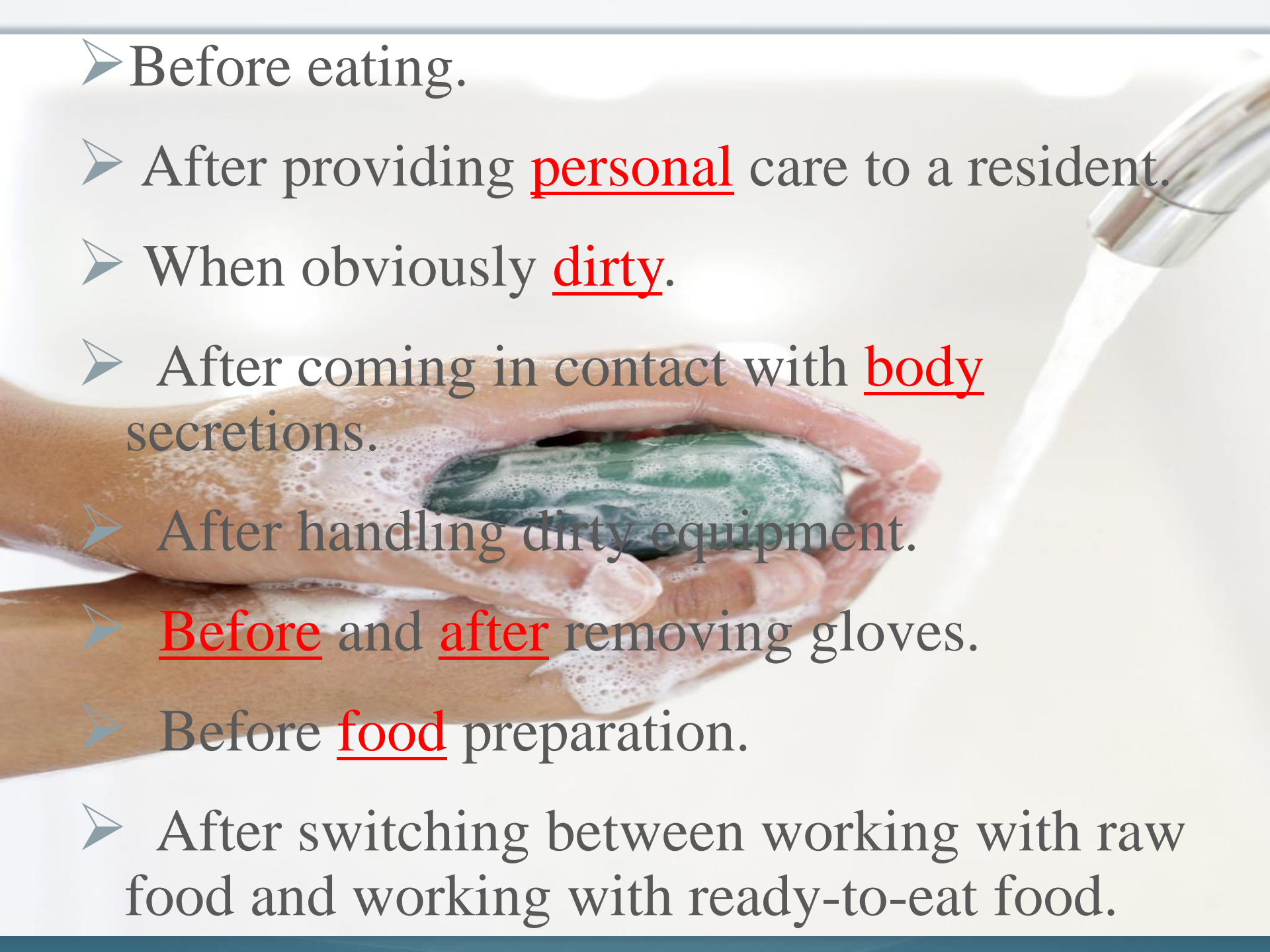
Infection Control

- ❖ Practice good personal hygiene.
- ❖ Make sure any open wounds are covered.
- ❖ Keep immunizations up to date.
- ❖ Use standard precautions including proper use of Personal Protective Equipment (PPE) as necessary.
- ❖ Follow good hand-washing practices.

Handwashing

- Absolutely essential in the prevention and control of infection.
- The single most effective means of controlling infectious disease.
- Before assisting with medications.
- After use of the toilet.
- After blowing/wiping your nose, or touching your face.

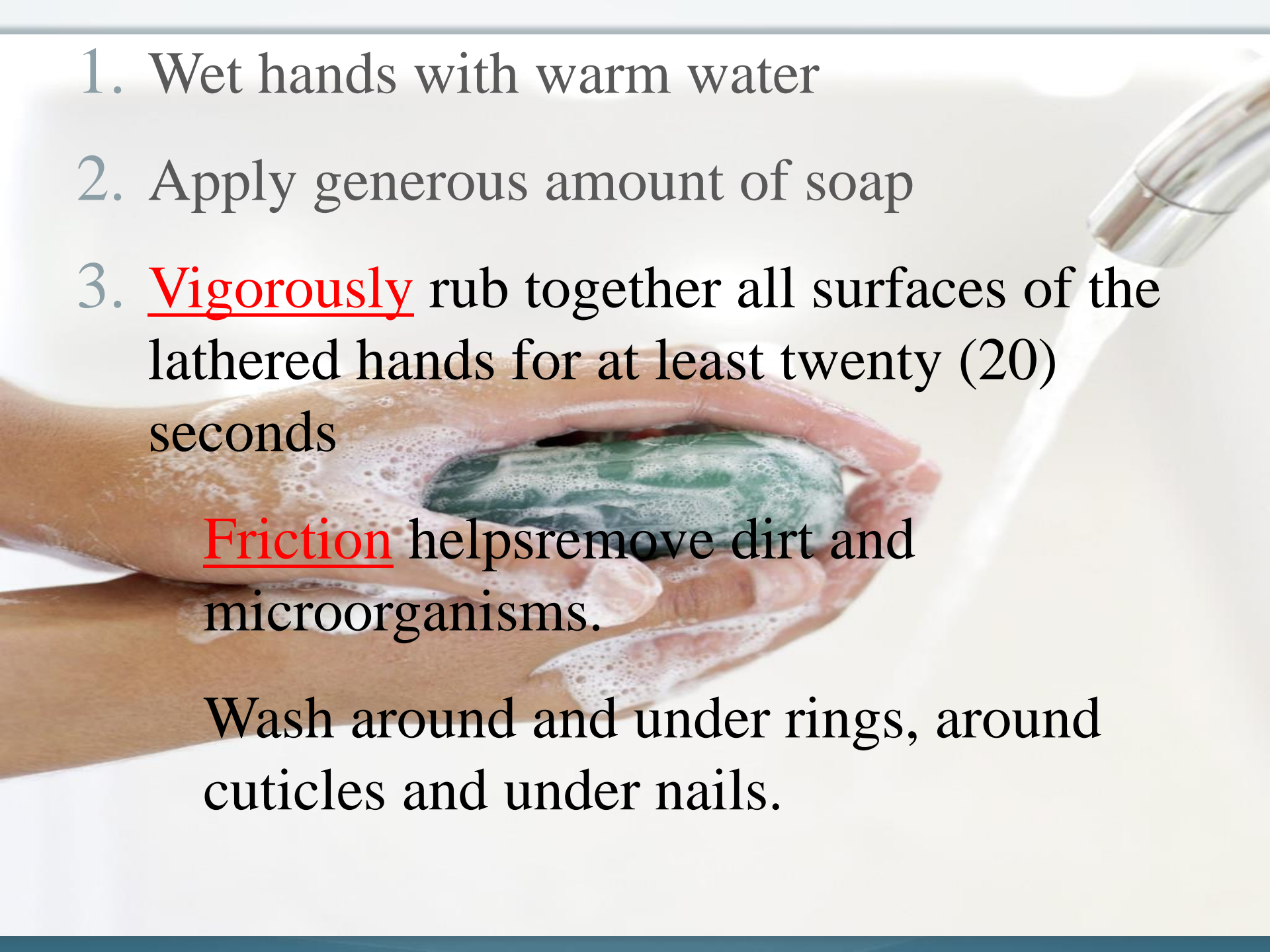


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- Before eating.
 - After providing personal care to a resident.
 - When obviously dirty.
 - After coming in contact with body secretions.
 - After handling dirty equipment.
 - Before and after removing gloves.
 - Before food preparation.
 - After switching between working with raw food and working with ready-to-eat food.

1. Wet hands with warm water
2. Apply generous amount of soap
3. Vigorously rub together all surfaces of the lathered hands for at least twenty (20) seconds

Friction helps remove dirt and microorganisms.

Wash around and under rings, around cuticles and under nails.





4. Rinse hands thoroughly under a stream of water.

Running water carries away dirt and debris. Point fingers down so water and contamination won't drip toward elbows.

5. Dry your hands with a clean towel

GLOVES

- * Wear gloves when coming in contact with blood, body fluids or open wounds.
- * Wear gloves when coming in contact with dirty (contaminated) items.
- * Change gloves between tasks.
- * Change gloves after contacting matter that may be contaminated.
- * Remove gloves promptly after use.
- * Remove gloves before touching uncontaminated items and surfaces.
- * Wash hands after removing gloves



Home Cleanliness:

- * Housekeeping – all providers are responsible for ensuring the home is kept sanitary and clean.

Appropriate cleaning materials need to be available for use.

Keep cleaners locked away if hazardous.

- * Counters, tables and floors – any food spilled should be cleaned in a timely manner and not allowed to dry.
- * Linens and clothing – laundering of linens and clothing should occur at least weekly and immediately if soiled with blood or any body secretions.

Hygiene Issues:

- Peri-care – Some clients may need assistance with toileting. Proper hygiene techniques include wiping front to back to prevent cross contamination and infection.
- Bathing – all bathing and shower areas need to be thoroughly cleaned after each use.
- Personal care items – all clients must have their own hygiene items. These items are not shared with other clients (e.g., hair brush, toothpaste, etc.).

Routes of Medication



Oral

Gastrostomy Tube

Topical

Inhaled

Eye (Optic)

Ear (Otic)

Nasal

Vaginal

Rectal

